PAGE 1 / 11 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Republicans Inspiring Success & Empowerment Project (RISE PROJECT PO Box 2485 ADDRESS (number and street) (Check if address is changed) Springfield 22152 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS RISEPROJECT@concentricoffice.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2014 C00567677 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Robert F. Carlin Type or Print Name of Treasurer Robert F. Carlin [Electronically Filed] 09 10 2014 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. FEC FORM 1

Office			For further information contact:
Use			Federal Election Commission
			Toll Free 800-424-9530
Only			Local 202-694-1100

FEC	Form 1 (Revised 02/2009)	Page 2
	COMMITTEE tte Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below	v.)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Co information below.)	mplete the candidate
Name of Candidate		
Candidate Party Affil	ation Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		<u> </u>
Party C	ommittee: (National, State	(Domogratic
(d)	This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Politica	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	onnected organization is a:
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate committee. (i.e., nonconnected committee)	segregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fu	ndraising Representative:	
(g) ×	This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal candidate	
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political
Co	mmittees Participating in Joint Fundraiser	
1.	WALTERS FOR CONGRESS FEC ID number C CC	00546853
2.	COMSTOCK FOR CONGRESS FEC ID number C CO	0554261
3.	MILLER-MEEKS FOR CONGRESS FEC ID number C CO	0558825
4.	FRIENDS OF NAN HAYWORTH	0466490

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W	rite or Type Committee Name	e	
F	Republicans Insp	oiring Success & Empowerment Project (R	ISE PROJECT)
6.	Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor
N	ONE		
	Mailing Address		
	Maining Address		
		CITY STATE	ZIP CODE
	_		_
	Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
	Custodian of Records: Identification books and records.	ntify by name, address (phone number optional) and position of the person	in possession of committee
	Sue Carlir		
	Full Name		
	Mailing Address	8136 Old Keene Mill Road	
		Suite A300	
		Springfield VA 2	2152
	Title or Position	CITY STATE	ZIP CODE
	The of Fosition	SINIE	ZII GODE
	Partner	703 Telephone number	_ 569 9481
3.	Treasurer: List the name an any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and assistant treasurer).	the name and address of
	Full Name Robert F. 0	Carlin	
	Mailing Address	PO Box 2485	
		Springfield VA 22	2152
		CITY STATE	ZIP CODE
	Title or Position Treasurer	703 Telephone number	- 569 - 9481

	n 1 (Revised	d 02/2009)	Page 4
Full Name of Designated Agent	1 , , ,		
Mailing Address			
		CITY STATE	ZIP CODE
Title or Position]
safety deposit bo Name of Bank, I			
	Depository, 6		
Name of Bank, I	Depository, 6	1909 K Street, NW	
Name of Bank, I	Depository, 6	1909 K Street, NW	0003
Name of Bank, I	Depository, 6	1909 K Street, NW	0003 ZIP CODE
Name of Bank, I	Depository, 6	1909 K Street, NW Washington CITY STATE	
Name of Bank, I	Depository, 6	1909 K Street, NW Washington CITY STATE	ZIP CODE
Name of Bank, I	Depository, e	1909 K Street, NW Washington CITY STATE	ZIP CODE
Name of Bank, I	Depository, e	1909 K Street, NW Washington CITY STATE	ZIP CODE
Name of Bank, I	Depository, e	1909 K Street, NW Washington CITY STATE	ZIP CODE

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: 97 'A = G7 9 @ G B9 C I G'H9 L H'F 9 @ 5 H9 8 'HC' 5 'F 9 D C F H Z G7 < 98 I @ 'C F' + H9 A = N 5 H = C B

Form/Schedule: F1A Transaction ID:

Congresswoman Cathy McMorris Rodgers will serve as an honorary chair of the JFC, but no benefit, direct or in kind, will be provided to her or to Cathy McMorris Rodgers for Congress arising out of the JFC

Form/Schedule: Transaction ID:

Page 6 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Mailing Address **CITY** STATE . ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant **ELISE FOR CONGRESS** C00547893 FEC ID number

Page 7 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Mailing Address **CITY** STATE . ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant MCSALLY FOR CONGRESS C00512236 FEC ID number

Page 8 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Mailing Address **CITY** STATE . ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant FRIENDS OF MIA LOVE C00505776 FEC ID number

FEC Form 1G (Revised 06/2011) Page List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Mailing Address **CITY** STATE . ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant SENGER FOR CONGRESS C00544734 FEC ID number

FEC Form 1G (Revised 06/2011) Page 10 List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Mailing Address **CITY** STATE . ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant WENDYROGERS.ORG C00510958 10. FEC ID number

FEC Form 1G (Revised 06/2011) Page 11 List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Mailing Address **CITY** STATE . ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant MARILINDA GARCIA FOR CONGRESS C00552364 FEC ID number